

**Form CPF D105: Summary Report of Campaign
Receipts and Expenditures
Office of Campaign and Political Finance**

Commonwealth
of Massachusetts

File with: Director
Office of Campaign and Political Finance
Boston, MA 02108
One Ashburton Place
(617) 727-8352

CPF ID# 13740

Reporting period: 1/1 - 1/31 2003
Name of Candidate/Committee: David Maher
Name of Bank: Citizens Bank of Massachusetts

Beginning Balance for Reporting Period	<u>\$17,278.26</u>
Total Receipts in the Reporting Period	<u>\$710.00</u>
Total Expenditures in the Reporting Period	<u>\$3,188.79</u>
Ending Balance for the Reporting Period *	<u>\$14,799.47</u>

I hereby declare that the information contained herein is true and correct
to the best of my knowledge and belief:



Signature of Cashier or Bank Treasurer

Tad Klas

Name of Cashier or Bank Treasurer

(401) 282-4258

Telephone Number

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* This represents the ending balance in the campaign's checking account. Additional campaign funds may also be maintained in savings accounts.

Form CPF D106c: Report of Receipts

Office of Campaign and Political Finance, One Ashburton Place, Boston, MA 02108 (617) 727-8352

CPF ID# 13740
Candidate Name: David Maher
Committee Name: The David Maher Committee
Name of Bank: Citizens Bank of Massachus
Reporting period: 1/1 - 1/31 2003

<u>Date</u>		<u>Amount</u>
1/2/03	Deposit	\$100.00
1/3/03	Deposit	\$385.00
1/21/03	Deposit	\$225.00
Credits this period:		\$710.00

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Form CPF D106e: Report of Expenditures

Office of Campaign and Political Finance, One Ashburton Place, Boston, MA 02108 (617) 727-8352

CPF ID# 13740
 Candidate Name: David Maher
 Committee Name: The David Maher Committee
 Name of Bank: Citizens Bank of Massachusetts
 Reporting period: 1/1 - 1/31 2003

Purposes of Payment

1. TV, Radio 2. Newspaper 3. Meetings 4. Printing 5. Office
 6. Travel 7. Signs or Displays 8. Transfer of Funds 9. Other * No Info Provided

Date Paid	Check #	Payee	Address	Code	Specific Purpose	Amount
1/6/03	1080	F.O.C.A Girls Softball Program	459 Broadway Cambridge MA 02139	9	Donation	\$50.00
1/2/03	1090	Bullock Brothers Ministry	47 Waverly Roxburn MA 02119	9	Donation	\$100.00
1/15/03	1094	Cambridge Housing Assistance Fund	PO Box 381332 Cambridge MA 02238	9	Donation	\$35.00
1/7/03	1096	Agassiz Neighborhood Council	20 Sacramento Cambridge MA 02138	9	Donation	\$25.00
1/7/03	1097	Staples	Fresn Pond Cambridge MA 02140	5	film	\$34.42
1/21/03	1091	Friends of Cambridge Athletics	PO Box 398099 Cambridge MA 02139	9	Donation	\$50.00
1/24/03	1098	Royal Sonesta Hotel	5 Cambridge Park way Cambridge MA 02142	9	Dec 10th Fundraiser , Food ; Service; Audio	\$2,794.37
1/24/03	1101	On the Rise	341 Broadway Cambridge MA 02139	9	Donation	\$50.00
1/30/03	1102	Cambridge Community Foundation	99 Bishop Allen Dr Cambridge MA 02139	9	Donation	\$50.00

Expenditures this period: **\$3,188.79**

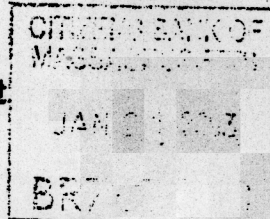
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Commonwealth of
Massachusetts

Form CPF D106: Receipts and Expenditures Report
Office of Campaign and Political Finance

Report of Receipts



Office of Campaign and Political Finance, One Ashburton Place, Boston, MA 02108 (617) 727-8352

Please print or type all information on this form

Candidate Name:

DAVID MAHEL

Committee Name:

THE DAVID MAHEL COMMITTEE

Name of Bank:

CITIZENS BANK

Reporting Period from:

through 1/20/03 Page # 1 of 1

M.G.L. c. 55 requires the name and residential address to be provided for all contributors who donate more than \$50 in a calendar year. In addition, the occupation and employer is also required for persons who contribute \$200 or more in a calendar year.

Cash/ Bank #	Deposit Date	Name and Address (Alphabetical listing mandatory)	Amount \$	Occupation and Employer (Contributions \$200 or more)
1 53- 7112	1/20/03	ALBERT, CLAIR 36 HAGOUN ST CAMB MA	100.00	
2 53- 7167	1/20/03	GRIFFEN, PAUL 99 RINDGE AVE, CAMB MA	100.00	
3 53- 59	1/20/03	HASSETT, LYNN 37 ROYAL AVE, CAMB MA	25.00	
4				
5				
6				
7				
8				
9				
10				

Contributions in excess of \$50 (or listed above) 225.00

Contributions \$50 and under (not listed above)

Total this page

225.00

Total Deposit (sum of all pages)

\$ 225.00

Candidate or Committee: Fill out this side only in triplicate and take to the bank with your deposit. One copy should be receipted by the bank and then retained by the committee: the bank keeps two copies, one of which will be sent to OCPF.



Commonwealth of
Massachusetts

Form CPF D106: Receipts and Expenditures Report
Office of Campaign and Political Finance

Report of Receipts

CITIZENS BANK OF
MASSACHUSETTS

DEC 31 2002

688-02

Office of Campaign and Political Finance, One Ashburton Place, Boston, MA 02108 (617) 727-8352

Please print or type all information on this form

Candidate Name:

DAVID MANER

1105183049

Committee Name:

THE DAVID MANER COMMITTEE

Name of Bank:

CITIZENS BANK

Reporting Period from:

through 12-31-02 Page # 1 of 1

M.G.L. c. 55 requires the name and residential address to be provided for all contributors who donate more than \$50 in a calendar year. In addition, the occupation and employer is also required for persons who contribute \$200 or more in a calendar year.

	Cash/ Bank #	Deposit Date	Name and Address (Alphabetical listing mandatory)	Amount \$	Occupation and Employer (Contributions \$200 or more)
1	53-59	12-31-02	MOROSO, JOSEPH 161 THIRD STREET CAMB. MA 02141	100.00	
2					
3					
4					
5					
6					
7					
8					
9					
10					

Contributions in excess of \$50 (or listed above)

100.00

Contributions \$50 and under (not listed above)

Total this page

100.00

Total Deposit (sum of all pages)

\$ 100.00

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Form CPF D106: Receipts and Expenditures Report
Office of Campaign and Political Finance

Report of Receipts

Commonwealth of
Massachusetts

Office of Campaign and Political Finance, One Ashburton Place, Boston, MA 02108 (617) 727-8352

Please print or type all information on this form

Candidate Name:

DAVID MANER

Committee Name:

THE DAVID MANER COMMITTEE

Name of Bank:

CITIZENS BANK

Reporting Period from:

through 12-31-02 Page # 1 of 1

M.G.L. c. 55 requires the name and residential address to be provided for all contributors who donate more than \$50 in a calendar year. In addition, the occupation and employer is also required for persons who contribute \$200 or more in a calendar year.

Cash/ Bank #	Deposit Date	Name and Address (Alphabetical listing mandatory)	Amount \$	Occupation and Employer (Contributions \$200 or more)
1 5-7017	12-31-02	HEALY, MICHAEL 1 HODGERD. NEWINGTON, MA	100.00	
2 5-13	12-31-02	LABLOUSKY, EVA MA 34 MAPLE STREET, LEXINGTON	50.00	
3 5-7017	12-31-02	PLUMBERS UNION LOCAL 12 1340 MASS AVE BOSTON, MA 02125	200.00	LABOR UNION PAC FUND KEVIN L. COTTER BUSINESS MANAGER
4 5-13	12-31-02	ZAMPAGLII, BILL 7 EMMONS PLACE, COHB. MA	35.00	
5				
6				
7				
8				
9				
10				

Contributions in excess of \$50 (or listed above)

385.00

Contributions \$50 and under (not listed above)

Total this page

385.00

Total Deposit (sum of all pages)

\$ 385.00

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